



Docket No.: N0520.0047/P047
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Shinichiro Fukuoka

Application No.: 10/694,823

Confirmation No.: 6755

Filed: October 29, 2003

Art Unit: 2635

For: ARTICLE MANAGEMENT SYSTEM,
NONCONTACT ELECTRONIC TAG,
ARTICLE MANAGEMENT METHOD, AND
COMPUTER-READABLE MEDIUM

Examiner: M. Shimizu

**REQUEST FOR RECONSIDERATION IN RESPONSE TO NON-FINAL OFFICE
ACTION**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

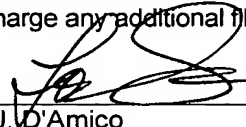
In response to the Office Action dated May 3, 2006, please reconsider the above-identified U.S. patent application for the following reasons:

The Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.



ITW

AMENDMENT TRANSMITTAL LETTER				Docket No. N0520.0047/P047	
Application No. 10/694,823-Conf. #6755		Filing Date October 29, 2003		Examiner M. Shimizu	
				Art Unit 2635	
Applicant(s): Shinichiro Fukuoka					
Invention: ARTICLE MANAGEMENT SYSTEM, NONCONTACT ELECTRONIC TAG, ARTICLE MANAGEMENT METHOD, AND COMPUTER-READABLE MEDIUM					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	17	- 20 =		x	
Independent Claims	5	- 5 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 _____ Thomas J. D'Amico Attorney/Agent Reg. No.: 28,371				Dated: <u>August 3, 2006</u>	
DICKSTEIN SHAPIRO LLP 1825 Eye Street, NW Washington, DC 20006-5403 (202) 420-2232					